| No. J 826 | | Due no later than Dec 31, 2015 | | 2. Registered | 2. Registered Agent and Address (NO PO BOX) | | | |
|---|---|--|---|-------------------------------------|---|-------------------|-------------------------|--|
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF | | Annual Report Form 1. Mailing Address: Correct in this box if needed. BVAAC II, LLP ANDREA D PUELLO 901 N CURTIS RD SUITE 100 BOISE ID 83706 | | 901 N CUR' SUITE 100 BOISE ID | JOHN D JEPPSON MD 901 N CURTIS RD SUITE 100 BOISE ID 83706 3. New Registered Agent Signature:* | | | |
| RECEIVED BY DUE DATE 4. Limited Liability Partnerships: Enter Na | | and Divisions Add | vecces of the (2) or make newtone | | | | | |
| Office Held | Name | ames and business Add | Street or PO Address | City | State | Country | Postal Code | |
| PARTNER PARTNER PARTNER | JOHN D JEP MICHAEL V GEORGE W | KEILEY MD | 901 N CURTIS RD SUITE 100 901 N CURTIS RD SUITE 100 901 N CURTIS RD SUITE 100 | BOISE BOISE BOISE | ID ID ID | USA USA USA | 83706 83706 83706 | |
| 5. Organized Under the Laws of: ID J 826 | | 6. Annual Report must be signed.* Signature: Andrea Puello Name (type or print): Andrea Puello | | | Date: 10/21/2015 Title: Office Manager | | | |
| Processed 10/21/2015 | * Electronically provided signatures are accepted as original signatures. | | | | | | | |